



State Of Alabama
Board Of Heating And Air Conditioning Contractors
100 North Union Street Ste 630
Montgomery Al 36130
(334) 242-5550



BUSINESS NAME CHANGE APPLICATION

New Business Name: _____

Previous Business Name: _____

(_____) _____
Business Phone Number

(_____) _____
Fax Phone Number

(_____) _____
Cell Phone Number

(_____) _____
Home Phone Number

Mailing Address: _____

City: _____ County: _____ State: _____ Zip: _____

Physical Location: _____

The organization is a: ☐ Sole Proprietorship/Individual ☐ Partnership ☐ Corporation ☐ LLC

The individual(s) is regularly employed by or is the sole owner of this organization and is in Responsible Charge as defined in Section 34-31-18 (7) for all heating and air conditioning work performed by this organization.

LIST OF CERTIFIED CONTRACTORS

**Please list all contractors with their certification numbers that wish to change their business name;
New applicants will be issued a certification when application is filed.**

(1) _____ Certification # _____

(2) _____ Certification # _____

(3) _____ Certification # _____

I wish to inform you that the business name listed above is a bona fide active heating and/or air conditioning organization as described on this information sheet and that all information hereby submitted is complete and accurate.

Signature: _____

Date: _____

MUST SURRENDER CURRENT LICENSE CARD

Change Business Name Fee: \$25.00 for each Contractor

If you wish to pay by **Credit Card**, please enter the credit card information below:

Check One: Visa__ Mastercard__ Signature: _____ Date: _____

Card #: _____ Expiration Date: _____